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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--------|------------------------------------------------------------|---------|------------------|--|
| No. <b>W 96644</b>                                                                                                                                     |                     | <b>Due no later than Sep 30, 2018</b>                                                                                                        |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>         |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                     | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>VERTICALCOACH, LLC<br>WILLIAM EISENBRANDT<br>PO BOX 1236<br>HAYDEN ID 83835 |        | WILLIAM EISENBRANDT<br>2692 HUDLOW ROAD<br>HAYDEN ID 83835 |         |                  |  |
|                                                                                                                                                        |                     |                                                                                                                                              |        | 3. <u>New</u> Registered Agent Signature:*                 |         |                  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                     |                                                                                                                                              |        |                                                            |         |                  |  |
| Office Held                                                                                                                                            | Name                | Street or PO Address                                                                                                                         | City   | State                                                      | Country | Postal Code      |  |
| MEMBER                                                                                                                                                 | WILLIAM EISENBRANDT | PO BOX 1236                                                                                                                                  | HAYDEN | ID                                                         | USA     | 83835            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                     | 6. Annual Report must be signed.*                                                                                                            |        |                                                            |         |                  |  |
| <b>ID<br/>W 96644</b>                                                                                                                                  |                     | Signature: William Eisenbrandt                                                                                                               |        |                                                            |         | Date: 08/21/2018 |  |
|                                                                                                                                                        |                     | Name (type or print): William Eisenbrandt                                                                                                    |        |                                                            |         | Title: Owner     |  |
| Processed 08/21/2018                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                    |        |                                                            |         |                  |  |